## FORM D



## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
ORM LIMITED OFFERING EXEMPTION

14	72	3	9.	<u>3</u>

OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005

expires:	may 31,	, 2005
Estimated	average burder	1
nours per i	response	16 00

SEC USE ONLY					
Prefix	Serial				
بم ا	TE RECEIVED				

	100	UNIFORM LIN	AITED OFFERI	NG EXEM	PTION
Name of Offering (	check if this is an a	mendment and name has cha	nged, and indicate chang	ge.)	
Las Vegas C	Casino Lines, L.L.C	2007 Limited Offering			
Filing Under (Check Type of Filing:	box(es) that apply):  New Filing	Rule 504	Rule 505	⊠ Rule 50	Section 4(6) ULOE
•	·····	A. BASIC	IDENTIFICATION	DATA	( JABAN BERM JARAN BANDI PENAMBAN BAND BERM BERM JERM
1. Enter the informa	ation requested about the	ne issuer			
Name of Issuer	(  check if this is	an amendment and name has	changed, and indicate cl	nange.)	
Las Vegas C	Casino Lines, L.L.C	•			07087400
Address of Executiv	e Offices	(Number	r and Street, City, State,	Zip Code)	Telephone Number (Including Area Code)
8680 N. Atla	ntic Avenue, Cape	Canaveral, Florida 3292	20		(321) 868-1097
Address of Principa (if different from Ex	Business Operations (ecutive Offices)	(Numbe	er and Street, City, State	Zip Code)	Telephone Number (Including Area Code)
Brief Description of	Ducinece			·	PROCESSED
•			ah!a		
	<u> </u>	ng of passenger gaming	snip	• • • • •	JAN 0 7 2008
Type of Business Of ☐ corpo ☐ busin	oration	☐ limited partnership, alro		⊠other (pl	lease specify thypited liability company FINANCIAL
GENERAL INSTRUC Federal: Who Must File: All is 77d(6).		<u> </u>	for other foreign jurisdic		F L Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C
Exchange Commission	(SEC) on the earlier of	er than 15 days after the fir if the date it is received by the s registered or certified mail	he SEC at the address gi	he offering. A ven below or, if	notice is deemed filed with the U.S. Securities an received at that address after the date on which it is
Where to File: U.S. Se	curities and Exchange	Commission, 450 Fifth Stree	t, N.W., Washington, D.	C. 20549.	
Copies Required: Five	e (5) copies of this no nually signed copy or be	otice must be filed with the ear typed or printed signature	SEC, one of which m	ust be manually	signed. Any copies not manually signed must b
Information Required: information requested in the SEC.	A new filing must con in Part C, and any mate	tain all information requested crial changes from the inform	d. Amendments need on nation previously suppli-	ly report the nan ed in Parts A and	ne of the issuer and offering, any changes thereto, the dB. Part E and the Appendix need not be filed with
Filing Fee: There is no	federal filing fee.				
hat have adopted this made. If a state require	form. Issuers relying es the payment of a fee	on ULOE must file a separa as a precondition to the claim	te notice with the Secur m for the exemption, a f	ities Administra ee in the proper	ecurities in those states that have adopted ULOE and tor in each state where sales are to be, or have bee amount shall accompany this form. This notice shannotice and must be completed.
		A	TTENTION		
		oriate states will not r	esult in a loss of		exemption. Conversely, failure to file t ess such exemption is predicated on t

filing of a federal notice.

## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or □ Director ☐ Executive Officer ⊠ Beneficial Owner ☑ Promoter Check Box(es) that Apply: Managing Partner Full name (Last name first, if individual) Stottler, Jr., Richard H. Business or Residence Address (Number and Street, City, State Zip Code) 8680 N. Atlantic Avenue, Cape Canaveral, Florida 32920 □ Director General and/or Beneficial Owner ☑ Promoter Check Box(es) that Apply: Managing Partner Full name (Last name first, if individual) Malone, Giles Business or Residence Address (Number and Street, City, State Zip Code) 8680 N. Atlantic Avenue, Cape Canaveral, Florida 32920 □ Director ☐ General and/or Executive Officer □ Promoter ■ Beneficial Owner Check Box(es) that Apply: Managing Partner Full name (Last name first, if individual) Mullin, Larry Business or Residence Address (Number and Street, City, State Zip Code) 8680 N. Atlantic Avenue, Cape Canaveral, Florida 32920 □ Director ☐ General and/or ☐ Beneficial Owner ☐ Executive Officer ☐ Promoter Check Box(es) that Apply: Managing Partner Full name (Last name first, if individual) Business or Residence Address (Number and Street, City, State Zip Code) General and/or ☐ Director ☐ Beneficial Owner ☐ Executive Officer ☐ Promoter Check Box(es) that Apply: Managing Partner Full name (Last name first, if individual) Business or Residence Address (Number and Street, City, State Zip Code) ☐ General and/or ☐ Beneficial Owner ☐ Executive Officer Director Check Box(es) that Apply: ☐ Promoter Managing Partner Full name (Last name first, if individual) Business or Residence Address (Number and Street, City, State Zip Code) General and/or ☐ Beneficial Owner ☐ Executive Officer □ Director Check Box(es) that Apply: Promoter Managing Partner Full name (Last name first, if individual) Business or Residence Address (Number and Street, City, State Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	·· (2 · · · · · ·	5 2141		a see la co	1.1.1.4.1 <b>B.</b>	INFORMA	TION ABOU	T OFFERI	NG	$\{(x_1,y_2)\}_{x\in X}^{n+1}$		18 1877	est a bezi
1.	Has the i	ssuer sold, or	does the issu	er intend to	sell, to non-e Answer also	accredited in in Appendix	vestors in thi	s offering? if filing unde	T ULOB.				Yes No □ ⊠
2.	2. What is the minimum investment that will be accepted from any individual?  (subject to acceptance by Issuer of lesser amounts, in its discretion)							\$ <u>37.500</u>					
3.	Does the	offering perm	nit joint own	ership of a si	ngle unit?		·						Yes No ⊠ □
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								or dealer					
Full	Name (La	ist name first,	, if individual	)									
Bus	iness or Re	sidence Add	ress (Number	and Street,	City, State, 2	Zip Code)							
			•	-									
Nan	ne of Asso	ciated Broker	or Dealer									- ·	
Stat	es in Whic	h Person List	ed Has Solic	ited or Inten	is to Solicit	Purchasers			_				_
	(Check "	All States" or	check indivi	dual States).	************								All States
	AL	AK	AZ	AR	CA	co	СТ	DE	DC	FL	GA	HI	D
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	мо
	MT	NE	NV	NH	ľИ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	ਯਾ	VT	VA	WA	wv	WI	WY	PR
Full	Name (La	st name first,	, if individual	)		•							
Bus	iness or Re	esidence Addi	ress (Number	and Street,	City, State, 2	Zip Code)							
Nan	ne of Asso	ciated Broker	or Dealer										·
Stat		h Person List										_	
	(Check "	All States" or		dual States).								L	All States
	AL	AK	AZ	AR	CA	CO	CI	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT	NE	NV	NH	NJ	MM	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	\$D	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full	Name (La	st name first,	if individual	)	· · · · · · · · · · · · · · · · · · ·		·						······
Bus	in <b>ess o</b> r Re	esidence Add	ress (Number	and Street,	City, State, 2	Zip Code)							
Nan	ne of Asso	ciated Broker	or Dealer							<del></del>			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)													
	AL	AK	AZ	AR	CA	co	СТ	DE	DC	FL	GA	н	ID
	IL	N	ΪΑ	KS	KY	LA	ME)	MD	MA	MI	MN	MS	МО
	MT	NE	NV]	NH	NJ	NM	NY	NC	  ND	ОН	OK.	OR	PA
	RI	sc	SD	TN		ייד	VT	VA	=	wv	wı	wy	PR
	Ku	SC	اموا	114	TX	["	* 1	" "	WA	" <sup>v</sup>	""	\** I	[ [

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U	SE OF PROCEE	)S
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \sum_{\text{and}} \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate Offering Price	Amounts Already Sold
Type of Security		
Debt	\$	\$
Equity	\$	\$
Common Preferred		
Convertible Securities (including warrants)	\$	\$ <u>-0-</u>
Partnership Interests	\$	\$
Other (Specify Nonvoting LLC Membership Interests)	\$2,250,000	\$
Total	\$2,250,000	\$
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors		\$ <u>-0-</u>
Non-accredited Investors	N/A	\$N/A
Total (for filings under Rule 504 only)	N/A	\$N/A
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of Security	Dollar Amount Sold
Type of offering	37/4	Ф <b>Б</b> Т/А
Rule 505		\$ <u>N/A</u>
Regulation A	N/A	\$N/A
Rule 504		\$ <u>N/A</u>
Total	N/A	\$N/ <u>A</u>
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		<b>⊠</b> \$
Printing and Engraving Costs		<b>⊠</b> \$ <u>1,000</u>
Legal Fees		\$ 46,000
Accounting Fees		<b>3,000 3,000 3,000 3,000</b>
Engineering Fees		<b>⊠</b> \$
Sales Commissions (specify finders' fees separately)	i	<b>▼</b> \$0-
Sales Commissions (specify finders fees separatery)		
Other Expenses (identify)	l	<b>★</b> \$

C. OFFERING PRICE, NUM	IBER OF INVESTORS, EXPENSES AND U	SE OF PROCEEI	)S
	te offering price given in response to Part C -	•	
•	I in response to Part C - Question 4.a. This		
difference is the "adjusted gross proceeds	to the issuer."		\$ <u>2,200,000</u>
5. Indicate below the amount of the adjusted to be used for each of the purposes shown. If furnish an estimate and check the box to the lested must equal the adjusted gross proceeds to Question 4.b above.	If the amount for any purpose is not known, oft of the estimate. The total of the payments	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		<b>⋈</b> \$ -0-	<b>⊠\$</b> 0-
Purchase of real estate		⊠ \$	<b>S</b> -0-
	of machinery and equipment	<b>⋈</b> \$	<b>□</b> \$ <u>-0-</u>
,	• • •		
	nd facilities	<b>∑</b> \$	<b>∑</b> \$
that may be used in exchange for the assets	the value of securities involved in this offering or securities of another issuer pursuant to a	⊠ \$	<b>⊠\$</b> -0-
Repayment of indebtedness		<b>∑</b> \$ 775,000	<b>∑</b> \$ <u>-0-</u>
Working capital		<b>⊠</b> \$	<b>⊠</b> \$ <u>375,000</u>
Other (specify): Refit of ship, certifications	and terminal improvements	<b>⊠</b> \$	<b>⊠</b> \$ <u>850,000</u>
Sales Tax, Liquor Licenses	S	<b>≤</b> \$	<b>∑</b> \$ 200,000
Column Totals		<b>S</b> <u>775,000</u>	<b>⊠</b> \$ <u>1,425,000</u>
•	)	⊠ \$	2,200,000
	D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be si 505, the following signature constitutes an und upon written request of its staff, the information of Rule 502.	lertaking by the issuer to furnish to the U.S. Se	curities and Excha	nge Commission,
-	Signature		,
Las Vegas Casino Lines, L.L.C.	to K pl	12/20/	2007
	Title of Signer (Print or Type)		
Larry Mullin	President/		

ATTENTION \_\_\_\_\_\_\_ Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)